Only

## STATEMENT OF

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**FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Clearway Energy Group LLC PAC 100 California St. ADDRESS (number and street) Floor 4 (Check if address is changed) San Francisco 94111 CA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS clearwaypac@electioncompliance.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2019 C00708180 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Ryder, Steven, , , Type or Print Name of Treasurer Ryder, Steven, , , [Electronically Filed] 09 19 2019 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

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	orm 1 (Revised 02/2009)  COMMITTEE	Page <b>2</b>
	e Committee:	
(a)	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Com information below.)	plete the candidate
Name of Candidate		
Candidate Party Affiliat	ion Office Sought: House Senate President	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Cor		
(d)		(Democratic, Republican, etc.) Party
Political A	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con	nected organization is
	Corporation Wo Capital Stock	Labor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f) <b>x</b>	This committee supports/opposes more than one Federal candidate, and is NOT a separate se committee. (i.e., nonconnected committee)	gregated fund or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fund	draising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
Com	nmittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.		

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Write or Type Committee Na		- 0
Clearway Ene	ergy Group LLC PAC	
	d Organization, Affiliated Committee, Joint Fundraising Represen	ntative, or Leadership PAC Sponsor
None		
Mailing Address		
	CITY	ATE ZIP CODE
Relationship: Conne	cted Organization Affiliated Committee Joint Fundraising Repr	resentative Leadership PAC Sponsor
. Custodian of Records: books and records.	dentify by name, address (phone number optional) and position of	f the person in possession of committee
Outsou	ırcing, PAC, , ,	
Mailing Address	5845 Richmond Hwy	
Maning Address	Suite 820	
	Alexandria	A   22303   -
Title or Position	CITY STA	TE ZIP CODE
Custodian of Records	Telephone number	703 - 347 - 6551
3. <b>Treasurer:</b> List the name any designated agent (e.g	and address (phone number optional) of the treasurer of the comg., assistant treasurer).	mittee; and the name and address of
Full Name Ryder, of Treasurer	Steven, , ,	
Mailing Address	100 California St.	
	Floor 4	
	San Francisco	A   94111   -     -
Title or Position	CITY STAT	
CFO	Telephone number	415 - 627 - 1602

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Full Name of Designated Agent	Linebarger, Karen, , ,					
Mailing Address	5845 Richmond Hwy					
<b>U</b>	Suite 820					
	Alexandria	VA 22303				
_	CITY	STATE	ZIP CODE			
Title or Position Assistant Treas	urer Telephone num	ber 703	347 - 6551			
Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.  Name of Bank, Depository, etc.  Capital Bank NA						
Mailing Address	2275 Research Boulevard, Suite 600					
	Rockville	MD 20850				
	CITY	STATE	ZIP CODE			
Name of Bank, I	Depository, etc.					
Mailing Address						

: 97 'A = G7 9 @ G B9 CI G'H9 LH F9 @ H98 'HC' 5 'F9 DCF H Z G7 < 98 I @ 'CF' + H9 A = N5 H = CB

Form/Schedule: F1N Transaction ID:

Change of banks.

Form/Schedule: Transaction ID: